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| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>  |  | Docket Number (Optional) 017622-000130US |  |
| <b>FY 2007</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i> |  |  |  |
| Application Number 10/725,837  |  | Filed December 1, 2003                   |  |
| For: MULTIPLE SLEEVE METHOD AND APPARATUS FOR TREATING EDEMA AND OTHER SWELLING DISORDERS          |  |  |  |
| Art Unit 3764  |  | Examiner THANH, QUANG D                  |  |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

|  | <u>Fee</u> | <u>Small Entity Fee</u> |          |
|--|------------|-------------------------|----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))               | \$120      | \$60                    | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))              | \$450      | \$225                   | \$ _____ |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020     | \$510                   | \$ 510   |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))             | \$1590     | \$795                   | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))             | \$2160     | \$1080                  | \$ _____ |

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet.

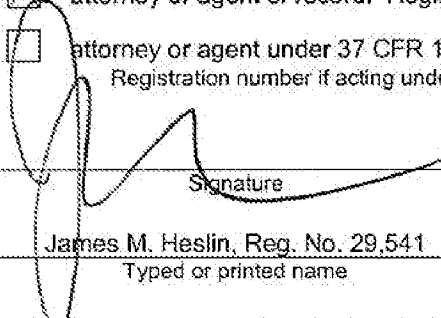
**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 29,541

☐ attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

  
 \_\_\_\_\_  
 Signature

James M. Heslin, Reg. No. 29,541  
 \_\_\_\_\_  
 Typed or printed name

Aug. 23, 2007  
 \_\_\_\_\_  
 Date

650.326.2400  
 \_\_\_\_\_  
 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.